

Please type a plus sign (+) inside this box TM +

PTO/SB/21 (08-00)

Approved for use through 10/31/02. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

O I TRANSMITTAL FORM <i>SEP 14 2004</i> <i>PATENT & TRADEMARK OFFICE</i> <i>ALL CORRESPONDENCE AFTER INITIAL FILING</i>		Application Number 09/974,571
		Filing Date Oct. 9, 2001
		First Inventor Peter G. Borden
		Confirmation No. 1003
		Group Art Unit 2877
		Examiner Name Gordon J. Stock Jr.
Total Number Of Pages In This Submission 30	Attorney Docket No. BOX013 US	

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (1 page in duplicate)	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached -- Credit Card Payment Form (1 pg)	<input checked="" type="checkbox"/> Replacement Drawings (11 Sheets) (Figs 1A, 1B, 2A, 2B, 3A, 3B, 3C, 3D, 4, 5, 6, 7 & 8)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply (17 pages)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declarations	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation of Previous Powers; And Statement Under 37 CFR 3.73(b)	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	RETURN RECEIPT POSTCARD Attachment for drawings (1 page)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> This is a Response to Missing Parts/ Incomplete Application under 37 CFR 1.52 or 1.53	Remarks	
<input type="checkbox"/> Copy of Notice To File Missing Parts (2 pages)	Please charge Deposit Account 50-2263 for any underpaid fee.	

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name	Omkar K. Suryadevara (Reg. No. 36,320) Silicon Valley Patent Group LLP 2350 Mission College Boulevard, Suite 360 Santa Clara, California 95054
Signature	
Date	Sept 14, 2004

EXPRESS MAIL LABEL NO. EV 448 866 767 US.